

The Care Team Concept

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“This extraordinary war in which we are engaged falls heavily upon all classes of people, but the most heavily upon the soldier. For it has been said, ‘all that a man hath will he give for his life,’ and while all contribute of their substance, the soldier puts his life at stake, and often yields it up in his country’s cause. The highest merit, then, is due to the soldier.”

— Abraham Lincoln, March 18, 1864
Speeches & Letters of Abraham Lincoln, 1832-1865

On May 8, 2007, a U.S. Army combat patrol was attacked on its way to a meeting in Jisr Diyala near Forward Operating Base (FOB) Hammer, Iraq. The lead vehicle of the patrol from the 3rd Heavy Brigade Combat Team (HBCT), 3rd Infantry Division (ID) was hit by an explosively formed penetrator (EFP) roadside bomb, killing two of the three Soldiers inside. The 22-year-old gunner, Specialist Saul Martinez, an infantryman with 3rd HBCT’s Headquarters Troop, was the only survivor in the vehicle. Martinez’s legs were both severely damaged and he had multiple lacerations and shrapnel wounds. He was quickly strapped to a backboard and taken by helicopter to the 28th Combat Support Hospital in the International Zone. SPC Martinez remembers most of the incident clearly, but more specifically, the help his fellow Soldiers provided.

Martinez recalled, “I remember lying there asking God to help me and they were there...The doctors told me I was on the verge of (death) every hour of every day. They explained that they had to put me under so they could control my body. I was really close to not being here.”

Martinez was heavily sedated; he woke up nine days later at Walter Reed Army Medical Center with his wife Sarah by his side. Two days after waking up, Martinez would have his other leg amputated due to injuries sustained in the blast. Martinez’s recovery at Walter Reed was a good experience for him.

“I got great care there,” he explained. “If I would have gone anywhere else in the world, I would have died. They took such good care of me ... I have nothing but good things to say about how they took care of me and my wife.”

Soon after his last surgery, Martinez was transferred to the Naval Medical Center in Balboa, California, to begin his physical therapy. Throughout his recovery process, SPC Martinez’s progress and issues were monitored and resolved by the 3rd HBCT “Care Team.”

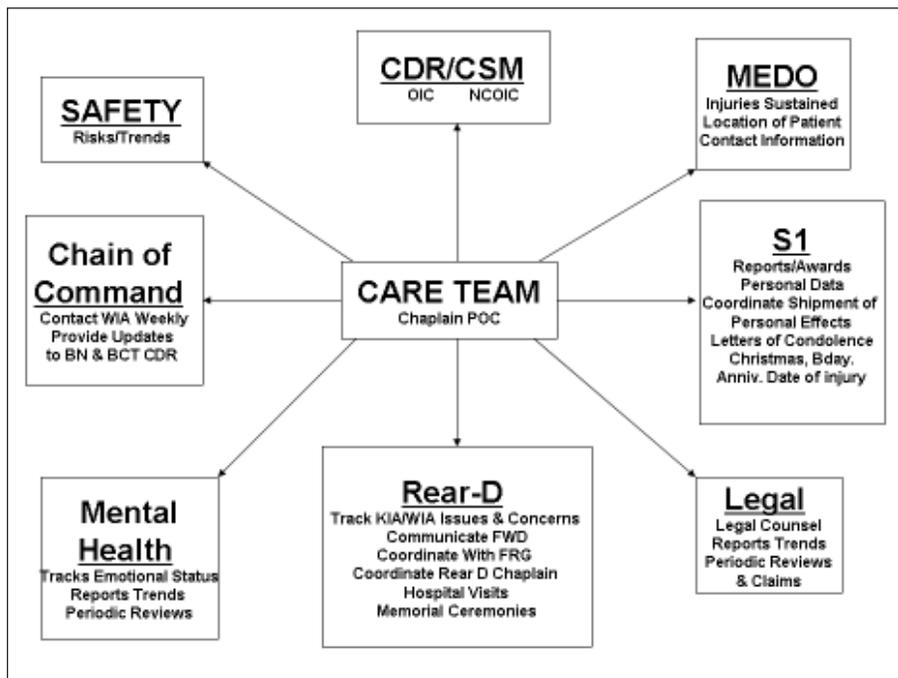


Figure 1

The 3rd HBCT, 3rd ID conducted aggressive, intelligence-driven combat operations in Mada’ in Qada during its recent deployment in Iraq. During the deployment in support of Operation Iraqi Freedom V, the 3rd HBCT commander, Colonel Wayne W. Grigsby, Jr., instituted the “Care Team” concept for the brigade to properly care for wounded Soldiers and the families of the fallen Sledgehammer heroes. The brigade established the Care Team to ensure Soldiers like SPC Martinez were not left to fight their life-changing injuries on their own. COL Grigsby wanted the Sledgehammer Brigade to be a brigade that never forgot its fallen and always supported its wounded.

The Care Team personnel developed and implemented a systematic method for the 3rd HBCT commander to identify and track problems, maintain regular contact and provide support to the brigade’s 178 wounded Soldiers and their families, as well as the families of the brigade’s 30 fallen heroes. The team helped provide both groups with the support they needed during and after the deployment.

The Care Team met to provide updates to the commander on all wounded Soldiers and survivors. Similar teams met at the Multi-National Division-Center and battalion levels as well. The 3rd HBCT Care Team focused on helping to meet the spiritual, physical, emotional and professional needs of the wounded Soldiers in the brigade. The Care Team, under the guidance of the brigade

commander, command sergeant major, and executive officer, consisted of key staff members who were subject matter experts in these areas (see Figure 1).

During the deployment the following leaders played critical roles in the Care Team:

The 3rd HBCT Care Team was chaired by the commander, COL Grigsby. The team provided him with a “desk-side” briefing using a simple binder, which remained with the commander and was continually updated by the brigade chaplain.

Brigade Command Sergeant Major James Pearson provided input on necessary policy changes and helped focus the team’s efforts into areas which needed additional attention. Major Dewey Boberg, the brigade executive officer, managed the efforts of the Care Team members to accomplish the mission and meet the commander’s intent.

Chaplain (LTC) Timothy Sowers, the brigade chaplain, served as the primary staff proponent and brought together the products from the various team members. COL Grigsby chose the chaplain to serve as the primary staff proponent for the Care Team because of the special emphasis of a chaplain’s mission: to nurture the living, care for the wounded, and honor those who have paid the ultimate sacrifice. CH Sowers kept a record of each fallen hero and wounded warrior. As the primary staff proponent, he collected the information from the different team members and ensured the brief was scheduled and prepared for the commander. The chaplain was the key link to ensure accuracy and coordination in the care for all Soldiers tracked by the Care Team.

Major Cynthia Majerske, the brigade surgeon, and Captain Steven Jones, the brigade medical operations officer, addressed the specific circumstances of each wounded Soldier and the status of medical support at all combat outposts and patrol bases. Additionally, Captain Ewa Garner personally contacted each wounded warrior, no matter where they were located — in theater, in a medical treatment facility in OCONUS, or in a medical facility in the United States. Garner spoke with Soldiers to ascertain the progress of their treatment and recovery, issues or concerns with records or patient administration, status of filing for Traumatic Servicemen’s Group Life

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Insurance (TSGLI3), and many other problems.

The medical professionals on the team forwarded regular medical updates via e-mail from various venues. The entity known as Joint Patient Tracking Application (JPTA) tracks treatment, diagnosis, locations and pending transfers of all wounded in action (WIA) patients. JPTA forwarded information as patient treatment and situations changed. The division staff forwarded daily generic hospitalization reports regarding inpatient information from medical facilities around the world. Rear detachment personnel distributed both WIA and NWIA information to the medical operations officer every two days. The medical operations officer maintained direct contact to patient information through non-secure and secure phone lines and liaison notification officers (LNOs) in theater and Germany. Once Soldiers were transferred back to CONUS, the rear detachment command channels tracked their status. The medical professionals of the Care Team navigated the vast and complex flow of information and kept the commander properly informed on the status of wounded Soldiers and surviving family members.

Captain Angela Mobbs, the brigade mental health officer, advised the commander on the status of specific cases, compiled statistics showing current trends, and outlined her priority of effort based on her workload and the commander’s guidance. She maintained a list of Soldiers on duty restrictions due to mental health and combat stress-related symptoms as well as those who were then returned to duty. CPT Mobbs tracked those Soldiers who were evacuated

from theater to ensure they received mental health treatment in CONUS as well as those who were late deployers due to medication stabilization and other psychological factors. Command-directed evaluations were tracked and compared with other team members to determine if any underlying trends were affecting the brigade. This provided the commander with a comprehensive view of the morale and psychological status and health of wounded Soldiers, “at risk” Soldiers, and the unit as a whole.

Major Carla Simmons, brigade judge advocate, and Captain Paul Lloyd, brigade trial counsel and operational law attorney, provided statistics on the number of Soldiers requiring legal assistance in the areas of marriage, legal separation, divorce, child support, and other related matters. They also provided statistics on the types of misconduct resulting in courts-martial, non-judicial punishment, and administrative separations under AR 635-200. With this data, leaders were able to identify negative trends and react accordingly. The analysis also showed various concerns of Soldiers at different times of the year. For example, during the course of the year there was a spike in the number of Soldiers seeking legal assistance for divorce. The commander was able to compare statistics with the lawyers, the mental health representative and chaplain to better assess concerns within the brigade and develop a plan to help Soldiers cope with specific issues. Through this collaborative effort specific Care Team members could identify high risk Soldiers and advise commanders at all levels. This allowed the command to be proactive and help Soldiers in need of professional assistance.

Major Joseph Pridgen, the brigade adjutant, tracked the submission and presentation of Purple Hearts; monitored the submission of Bronze Star medals, combat badges, posthumous awards and promotions; tracked shipment of personal effects (PE) and letters of sympathy and condolence to the next of kin. Shipment of PE was a time-sensitive mission requiring close coordination with the mortuary affairs section (for shipment of WIA and KIA PE) and postal unit (for use of official mail for non-combat related PE). It was vital early in the deployment to establish an official mail

SIGACTS		WIA			Photo
		NOK Info.	BIO Info.	Nature of Initial Injury	
		Current Location			
		Current Address			
		Phone Numbers			
Date	Contact Person	Remarks/ Needs			

Figure 2 — Sample Care Slide

account and educate leaders on the procedures to inventory, pack and ship the various categories of PE. He also worked closely with the brigade chaplain to produce periodic letters to the brigade’s wounded warriors to express the commander’s and the sergeant major’s on-going concern and appreciation for their valiant sacrifices.

Mr. Jim Messer, the brigade safety manager, and 1st Lieutenant Donald Dryer, the brigade safety officer, ensured relevant safety issues were discussed and addressed during Care Team meetings. The safety personnel provided detailed tracking information on accidental trends both within the brigade and within the Iraqi theater of operations. Messer and Dryer oversaw all accident investigations, especially in the areas where brigade Soldiers were injured, to find and eliminate the root cause of accidents. The safety personnel were responsible for raising the safety consciousness of the Soldier and encouraging Soldiers to make safety a part of everything that they do. Safety also oversaw safety audits and inspections on FOB Hammer and the surrounding outposts and patrol bases. The information that was collected during these inspections and investigations was shared during the Care Team meetings to help identify areas that could be influenced in the future and prevent predictable harm to our Soldiers. One area where safety focused on the positive aspects of Soldier safety included the brigade’s safety awards program. This program included awards such as streamers and certificates to battalions and subordinate units. For individual Soldiers, safety awards included medals, coins, safety-related gifts, phone cards, and personal recognition by the commander. This brigade’s safety awards program was so successful that it was adopted by the entire division and has resulted in brigade Soldiers being personally awarded coins and certificates by the division commander.

Each member of the Care Team brought a unique perspective. Similar to pieces of a puzzle, when all the perspectives were combined, the picture emerged for the command group. With the command group possessing this holistic picture, leaders were able to ensure awards were presented in a timely manner, personal effects were tracked and returned to the Soldier, and Soldiers were properly

cared for on a variety of levels and their sacrifice not forgotten.

For the Soldiers continuing the fight every day on the streets of Iraq, the commander and sergeant major could also see which units were experiencing the greatest amount of stress. As they analyzed data from different team members and gathered information from the chain of command, they could develop an even greater picture concerning the morale and strength of the brigade. This helped to ensure that the greatest resource, Soldiers in the Hammer Brigade, were cared for, valued, and appreciated by the command for their sacrifices.

Through their selfless service, Soldiers of the Sledgehammer Brigade demonstrated their commitment to the Army and nation. COL Grigsby and CSM Pearson wanted the brigade to be fully committed to supporting those Soldiers. They felt the leadership of the brigade could not be replaced by the technology and bureaucracy that can be inherent in the casualty system. The Care Team was a vital tool to ensuring that the brigade never forgot those who gave the full measure and always supported those who carried serious injuries into the rest of their lives.

Slides were used to track each fallen hero and wounded Soldier evacuated from theater. The purpose of the slides was to accurately portray the severity of the Soldier’s injuries, note improvements, and record any concerns. The slides also enabled the Care Team to track the wounded Soldiers’ progress and issues (see Figure 2).

Each contact with the Soldier or family was listed in chronological order to show progress made. It was encouraging for everyone to read the progress, especially after witnessing such horrific events. Concerns were noted and the brigade leadership could address and quickly fix these issues through various means (see Figure 3).

The chain of command continually updated “contacts made” or the different “touches” with each Soldier or family. This allowed the command to share information in a quick and concise way. One battalion in the brigade, although task-organized to a different brigade, had effectively used these slides to maintain their Sledgehammer connection. Lieutenant Colonel Troy Perry, commander of the 2nd Battalion, 69th Armor Regiment, personally called wounded Soldiers each day. In fact, his staff daily called three or four Soldiers, continually tracking and updating care team

Figure 3 — Sample Care Contact Slide

RANK, (FIRST, LAST, MI)		PHOTO
COMPANY/BATTALION		
(CONT.)		
DATE:	CONTACT PERSON:	COMMENT/REMARKS:
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about
day/month/year	who / not / stop	Who did you call and what did you talk about

slides. He could then review and discuss his Soldiers' status with the brigade commander.

Chaplain (CPT) Tracy Kerr participated in the development of the Care Team for 2-69 Armor Regt. "I am both humbled and honored to have managed the process during OIF V," said Kerr. "Our command created a way to minister to our wounded Soldiers, their families, and those whose loved ones died in combat. Taking personal responsibility for Soldiers within our military family means that we invest in them in during their darkest hours as well as their most vibrant ones. Wounded Soldiers received systematic communications in order to meet their personal needs. The company or battalion command communicated with each WIA on a weekly basis. We were able to assist with issues regarding health, awards, family and personal effects through these contacts."

Healing not only took place for the family, as the command demonstrated care and concern during times of distress, healing also occurred for the combat Soldier still on the front lines.

CH Kerr went on to say, "It cannot be overstated that the need for frequent contact is greater within the first few months. Many of our wounded Soldiers were immediately concerned with their comrades left in the fight. Continued communication offers a real healing value as Soldiers share camaraderie and process the fight left behind."

Troops on the ground were able to track the progress of their friends with whom they had shared traumatic events. Troops on the ground received the highest boost in morale through the discovery of a wounded friend scheduling to get married or successfully learning to walk again. The value of these continued relationships added a healing property to the Army as a whole. These systematic moments of connecting with our wounded demonstrated what commitment and faithfulness are supposed to look like within a healthy family. It aided in keeping the brigade Army Strong through simple acts of kindness.

Families whose loved ones fell in battle received the same dignity and respect as those who are wounded. Grieving families are most delicate. It is imperative that each contact demonstrated a positive demeanor



U.S. Navy photo

SPC Saul Martinez attaches his prosthetic leg after climbing a 30-foot wall at Naval Medical Center San Diego October 12, 2007.

and a sensitive response.

"The families within our battalion have responded in the most appreciative ways through our communicating efforts. Many families shared their continued support through care packages, thoughts, and prayers for the troops left in the fight," said Kerr. "Simple calls each quarter or proximate major holiday help families to realize that they continue to be valuable part of the Panther family. Our battalion received requests for memorial videos, memorial plot corrections, locations, and even expressions of appreciation through honor received from Division Tree-Planting Ceremonies in memory of their fallen loved ones."

The commander and command sergeant major tracked the progress of SPC Martinez since the EFP attack on May 8 through the Care Team. Initially the Care Team provided encouragement to SPC Martinez and his spouse by calling and tracking his progress. The Care Team was instrumental in ensuring his personal belongings and TA50 were returned to the United States. Additionally the S-1 tracked his award and ensured he received orders. The commander was able to quickly monitor these actions during meetings as he

reviewed each slide. Soldiers and commanders alike then visited SPC Martinez during R&R leave, constantly reminding Saul and his wife that they will be always part of the Sledgehammer team.

War forces each of us to go beyond the normal realms of life. One cannot say enough concerning the courage, patriotism and sacrifices each Soldier makes in the service of our country. Every day, Soldiers face the possibility of death or painful wounds. When Soldiers are injured during combat operations, it is vital to assist them in finding healing for their bodies, minds and spirits. As President Bush said about our wounded in 2003, "They're the finest of our citizens. If you spend any time with these young men and women, you know that whether it's on the battlefield or in the hospital, our men and women are always thinking of one another."

The 3rd HBCT Care Team embodied this spirit — Soldiers looking out for other Soldiers — and allowed a brigade combat team to systematically track wounded Soldiers and resolve their problems. The 3rd Brigade Heavy Combat Team will never forget the sacrifices made by Sledgehammer Soldiers.

CH (LTC) Timothy E. Sowers is the brigade chaplain for the 3rd Heavy Brigade Combat Team, 3rd Infantry Division, Fort Benning, Georgia. He entered active duty in 1991 after serving as a parish pastor for six years. He has served in Korea and Germany and deployed in support of OIF III and V.

MAJ Joseph F. Pridgen is an Adjutant General Corps officer who has been assigned as the 3rd HBCT S1 since October 2006. He entered military service in 1982 and served four years as an enlisted infantryman. He was commissioned in 1988 and re-entered active duty in 1991. He has served a total of five overseas tours. He deployed with 3rd HBCT for both their NTC rotation and their 15-month OIF V in 2007.

CH (CPT) Tracy N. Kerr is the battalion chaplain for 2-69 Armor Battalion at Fort Benning. He entered active duty in 2003 and is currently serving a 15-month tour in Baghdad, Iraq. Chaplain Kerr is from Raleigh, NC. He has his earned a MDIV in Christian Counseling from South Eastern Baptist Theological Seminary.

SPC Ben Hutto is a journalist assigned to the 3rd Heavy Brigade Combat Team, 3rd Infantry Division. He entered active duty in 2005 after receiving his bachelor's degree in English from the University of South Carolina-Aiken. His current deployment is in support of OIF V.
